



|   |             |   |   |                          |  |
|---|-------------|---|---|--------------------------|--|
| Substitute for form 1449/PTO<br>(Revised 07/2007)   |             |   |   | <b>Complete if Known</b> |  |
| <b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br><br>(Use as many sheets as necessary) |             |   |   | Application Number       | 09/458,602                                     |
|   |             |   |   | Filing Date              | December 8, 1999                               |
|   |             |   |   | First Named Inventor     | Florence C.I. Pagan                            |
|   |             |   |   | Art Unit                 | 2135   |
|   |             |   |   | Examiner Name            | Beemnet W. Dada                                |
| Sheet   | 2           | of  | 2 | Attorney Docket Number   | 042253/190999                                  |
| <b>OTHER DOCUMENTS</b>  |             |   |   |                          |  |
| Examiner<br>Initials*   | Cite<br>No. | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. |   |                          | English<br>Language<br>Translation<br>Attached |
|   | 3           | Ascend Communications Inc., Virtual Private Networks, 1997  |   |                          |  |
|   | 4           | Airamo, Virtual Private Networks, 1997  |   |                          |  |
|   | 5           | Claim Construction Order; Nomadix, Inc. vs. Second Rule LLC; Case No. 07-cv-01946-DDP-VBK; Filed October 3, 2008  |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |
|   |             |   |   |                          |  |

|                       |  |                    |  |
|-----------------------|--|--------------------|--|
| Examiner<br>Signature |  | Date<br>Considered |  |
|-----------------------|--|--------------------|--|

\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.